Lewis and Clark Fitness Challenge

We hope you found this program filled with fun and useful nutrition and

fitness activities. To help us design better materials for the future, please take a minute to fill out this evaluation form. Thank you for your time and suggestions. School Name (optional): _____ Grade Levels of students who participated: Number of students who participated: Number of weeks you used the program: _____ 1. What is your present position? 2. Please tell us about how you used the Lewis and Clark Fitness Challenge. What activities did you do? Who helped with the event? Please attach any newspaper articles, invitations, posters or flyers that you used. 3. Please rate the usefulness of each part of the kit on a scale of 1 (not useful at all) to 5 (very useful). 1 2 4 Overall kit 2 1 3 Nutrition Lessons 3 4 2 1 Fitness Lessons 2 4 1 Nutrition Resources 5 2 3 4 1 Fitness Resources 1 3 4 5 Lewis and Clark Resources

4.	How did parents participate? a. not at all b. received handouts c. participated in fitness activities d. other:
5.	What part of the program was the most helpful to you?
6.	What part of the program was the least helpful to you?
7.	What future nutrition materials would be helpful to you?
8.	Please make any other comments or suggestions regarding this program or future materials.

PLEASE RETURN TO: Katie Bark, RD, Montana Team Nutrition Program

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